



ISDH Hospital Service Report
 State Form 49476 (R /7-02)
 IC 16-21-6

Status: Finalized

I. Hospital Information

Hospital Name: INDIANA UNIVERSITY HEALTH BALL MEMORIAL HOSPITAL

Provider #: 15-0089

City: Muncie

County: Delaware

Year: 2016

Person Completing the Report: Derek Tatter

Email Address: dtatter@iuhealth.org

LICENSURE, ACCREDITATION, OR DESIGNATED UNITS (check all that apply)

State Licensure: Acute License LTC Certification

Private Accreditation: JCAHO HFAP

CMS Specialized Hosp: CAH TLC Rehab

DRG Exempt: Psych Rehab Swing Bed

Number of Total Hospital Full Time Equivalents 1803.2

II. Hospital Service Utilization

| Hospital Service Description | Number of Set-up Beds | Number of Discharges | Number of Patient Days | Annual Total Charges |
|------------------------------|-----------------------|----------------------|------------------------|----------------------|
| Burn Care | 0 | 0 | 0 | \$0 |
| Cardiac Intensive | 18 | 1079 | 4056 | \$24,600,000 |
| ICU Medical/Surgical | 18 | 1232 | 4394 | \$27,078,000 |
| ICU Neonatal | 23 | 0 | 0 | \$0 |
| ICU Pediatric | 0 | 0 | 0 | \$0 |
| Medical/Surgical | 202 | 12140 | 55842 | \$145,890,608 |
| Neonatal Intermediate | 0 | 214 | 3108 | \$15,550,500 |
| Normal Newborn | 0 | 1320 | 2705 | \$6,256,000 |
| Obstetrics | 28 | 1607 | 4254 | \$13,504,000 |
| Pediatric | 14 | 8704 | 33269 | \$77,740,605 |
| Psychiatric | 0 | 748 | 4510 | \$10,821,500 |
| Rehabilitation | 18 | 293 | 3903 | \$9,537,600 |
| Substance Abuse | 0 | 856 | 4658 | \$38,807,858 |
| Swing Bed Program | NA | 0 | 0 | \$0 |
| Extended Care | 0 | 0 | 0 | \$0 |

| | | | | |
|--------------------|-----|-------|--------|---------------|
| Observation Beds | 0 | 6209 | 8154 | \$159,709,403 |
| All Other Services | 18 | 59 | 148 | NA |
| Total Acute | 339 | 34461 | 129001 | NA |

III. Nursing Facility Utilization

| | Number of Licensed Beds | Number of Discharges | Number of Patient Days |
|------------------|-------------------------|----------------------|------------------------|
| Nursing Facility | 0 | 0 | 0 |

IV. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-9-CM Diagnostic Categories

| Diagnostic Categories | Number of Encounters | Diagnostic Categories | Number of Encounters |
|-----------------------|----------------------|-----------------------|----------------------|
| Infectious Disease | 3031 | HIV | 185 |
| Neoplasms | 19333 | Endocrine | 23828 |
| Diseases of Blood | 8433 | Mental Disorders | 12938 |
| Nervous | 12466 | Circulatory | 23674 |
| Respiratory | 12518 | Digestive Diseases | 12772 |
| Genitourinary | 18173 | Pregnancy | 9128 |
| Skin | 4720 | Musculoskeletal | 33665 |
| Congenital | 852 | Perinatal | 450 |
| All Injuries | 14181 | | |
| Other/Known | 110441 | Total Encounters | 320788 |

V. Number of Outpatient Encounters By Diagnostic Group

Please identify the number of outpatient encounters for your hospital by ICD-10-CM Diagnostic Categories

| Diagnostic Categories | Number of Encounters | Diagnostic Categories | Number of Encounters |
|---|----------------------|---|----------------------|
| Certain infectious and parasitic diseases | 0 | HIV | 0 |
| Neoplasms | 0 | Endocrine, nutritional and metabolic diseases | 0 |
| Diseases of blood and blood-forming organs and certain disorders involving the immune mechanism | 0 | Mental, Behavioral and Neurodevelopmental disorders | 0 |
| Diseases of the nervous system | 0 | Diseases of the circulatory system | 0 |
| Diseases of the eye and adnexa | | Diseases of the ear and mastoid process | |
| Diseases of the respiratory system | 0 | Diseases of the digestive Diseases | 0 |
| Diseases of the genitourinary system | 0 | Pregnancy, childbirth and the puerperium | 0 |
| Diseases of the skin and | 0 | Diseases of the | 0 |

| | | | |
|--|---|--|---|
| subcutaneous tissue | | musculoskeletal system and connective tissue | |
| Congenital malformations, deformations and chromosomal abnormalities | 0 | Certain conditions originating in the perinatal period | 0 |
| Injury, poisoning and certain other consequences of external causes | 0 | | |
| Other/Known | 0 | Total Encounters | 0 |

| Total ED Visits | ED Injury Visits | ED Injury Admissions |
|-----------------|------------------|----------------------|
| 56257 | 8628 | 1428 |

Comments

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